

C.L. "BUTCH" OTTER- Governor RICHARD M. ARMSTRONG - Director DEBBY RANSOM, R.N., R.H.J.T - Chief BUREAU OF FACILITY STANDARDS 3232 Elder Street P.O. Box 83720 Boise, Idaho 83720-036 PHONE: (208) 334-6366 FAX: (208) 364-1888 E-mail: fsb@idhw.state.id.us

February 6, 2007

Christopher Moore, Administrator Assisted Living on Shamrock 9622 West Silverbirch Street Boise, ID 83709 FILE COPY

License #: RC-547

Dear Mr. Moore:

On November 14, 2006, a follow-up/revisit, state licensure survey was conducted at Assisted Living on Shamrock. As a result of that survey, deficient practices were found. The deficiencies were cited at the following level(s):

• Non-core issues, which are described on the Punch List, and for which you have submitted evidence of resolution.

This office is accepting your submitted evidence of resolution.

Should you have questions, please contact Karen McDannel, RN, Health Facility Surveyor, Residential Community Care Program, at (208) 334-6626.

Sincerely,

Karen McDannel, RN
KAREN MCDANNEL, RN

Team Leader

Health Facility Surveyor

Residential Community Care Program

KM/sc

c:

Jamie Simpson, MBA, QMRP Supervisor, Residential Community Care Program

C.L. "BUTCH" OTTER – Governor RICHARD M. ARMSTRONG – Director DEBRA RANSOM, R.N.,R.H.I.T., Chief BUREAU OF FACILITY STANDARDS 3232 Elder Street P.O. Box 83720 Boise, ID 83720-0036 PHONE 208-334-6626 FAX 208-364-1888

January 22, 2007

CERTIFIED MAIL #: 7003 0500 0003 1967 0537

Chris Moore, Administrator Assisted Living on Shamrock 9622 West Silverbirch Street Boise, ID 83709

Dear Mr. Moore:

On **November 14, 2006**, a follow-up to the standard health care survey of July 27, 2006 was conducted at your facility. We have not yet received a response from the facility for that survey, which was due by **December 14, 2006**.

Enclosed is another copy of the Punch List identifying non-core issue deficiencies cited during the survey. Please submit evidence of resolution to our office on or before February 1, 2007.

Should you have questions regarding the survey or developing a response, please call our office at (208) 334-6626.

Sincerely,

JÁMIE SIMPSON, MBA, QMRP

Supervisor

Residential Community Care Program

JS/slc

Enclosure



JAMES E. RISCH – Governor RICHARD M. ARMSTRONG – Director DEBBY RANSOM, R.N., R.H.I.T - Chief BUREAU OF FACILITY STANDARDS 3232 Elder Street P.O. Box 83720 Boise, Idaho 83720-0036 PHONE: (208) 334-6626 FAX: (208) 364-1888 E-mail: fsb@idhw.state.id.us

FILE COPY

November 20, 2006

Christopher Moore, Administrator Assisted Living On Shamrock 9622 West Silverbirch Street Boise, ID 83709

Dear Mr. Moore:

On November 14, 2006, a follow-up visit to the standard health care survey of July 27, 2006, was conducted at Assisted Living On Shamrock. The core issue deficiencies issued as a result of the July 27, 2006, survey have been corrected.

Please bear in mind that non-core issue deficiencies were identified on the Punch List, a copy of which was reviewed and left with you during the exit conference. The completed Punch List form and accompanying proof of resolution (e.g., receipts, pictures, policy updates, etc.) are to be submitted to this office by December 14, 2006.

Should you have questions, please contact me at (208) 334-6626.

Sincerely,

JAMIE SIMPSON, MBA, QMRP

Supervisor

Residential Community Care Program

JS/slc

c: Marie Penavs, RN, Program Manager, Regional Medicaid Services, Region III – DHW Debra Ransom, R.N., R.H.I.T., Chief, Bureau of Facility Standards



BUREAU OF FACILITY STANDARDS P.O. Box 83720 Boise, ID 83720-0036 (208) 334-6626 fax: (208) 364-1888

ASSISTED LIVING Non-Core Issues Punch List

Facility Name			Physical Address	Phone Number	Phone Number	
AL On Shammock Administrator			27/6 Shamrock AUR City Vampa ID Survey Type	460.50	465-5923 ZIP Code	
			City	ZIP Code		
CL/15 MCO/C Survey Team Leader			Nampa To	93686 Survey Date		
Survey Team Leader				Survey Date		
P. Hendrichson			F/U	1/2/64	16	
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Response Required Date		Signature of Facility Representative			Date Signed	<u></u>